

09/5/18

| CLAIMS ONLY | | | | | | | | Application Number | | Filing Date | | |
|-------------|----------|--------|-----------------------|--------|------------------------|--------|--------|---|-------|-------------|-------|--------|
| 9/23/18 | | | | | | | | Applicant(s) | | | | |
| | | | | | | | | * May be used for additional claims or amendments | | | | |
| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | | | | | | |
| | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend |
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| Total | 3 | | | | | | Total | | | | | |
| Indep | | | | | | | Indep | | | | | |
| Total | 21 | | | | | | Total | | | | | |
| Depend | | | | | | | Depend | | | | | |
| Total | 24 | | | | | | Total | | | | | |
| Claims | | | | | | | Claims | | | | | |

| | 1st AMENDMENT | | 2nd AMENDMENT | |
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| TOTAL IND. | 3 | | 3 | |
| TOTAL DEP. | 10 | | 21 | |
| TOTAL CLAIMS | 13 | | 24 | |

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